

domen which called for laparotomy in the hospitals. There was a much larger proportion than might have been expected of aneurysms and especially of nerve-lesions of various kinds. Direct rifle-bullet wounds were often almost absolutely innocuous, and wounds of the head as a striking feature were followed with extreme rarity by serious deformities of the face. Amputations were rare, less than 1 per cent. of all cases treated in the hospitals requiring it, while trephining was relatively much more frequent. The results of a second operation under chloroform of wounded soldiers whose wounds had become infected were always very discouraging.

Summing up the results, Laurent says that during the single month of July, 1913, 150,000 men were killed and wounded on both sides, and of these more than half, at least 80,000, fell on the banks of the Bregalnitsa in the six days from June 30 to July 5. He quotes with approval the remarks of a commentator on these figures who says:

"If you put a zero behind each of these numbers you will have some idea of the effective strength of the armies and the losses that must be presumed to take place in any war which would to-morrow set the armed forces of any two first-class powers of Europe on the fighting line before each other. There would be not less than 1,500,000 dead and wounded in the course of the first month."

#### WAR AND ITS ROMANCE.

We are all so stunned at the happening of the impossible, the being forced to think of the unthinkable, that it is difficult even to imagine things in their proper proportions. Hell has certainly grabbed all Europe for its very own. Psychologically, it is of sad enough interest to see how quickly peaceful people, going through life in the most friendly relations, suddenly become crazed with the lust for blood; for killing; for murder by wholesale. It is also of interest, and of profound significance, that millions of men can be moved about a large area, cared for, fed, guided, herded hither and yon, and not a word of their actual location, movements or doings reach the knowledge of the outside world except such fragments as the leaders of these millions permit to escape. It would have seemed quite impossible so thoroughly and completely to bottle up all the avenues of escape for news; but it was done and is being done. The control of the masses by the few seems to be absolute; but will it always last?

#### THE EXPOSITION AND THE WAR.

The Directors of the Panama-Pacific Exposition have announced most positively that the Exposition will open on the date scheduled and that there is not the slightest question of postponing it on account of the European war. They state that nearly all the exhibits which had been promised will be in place on time and that the success of the Exposition is in no way a matter of doubt. It is quite probable that, if the war continues, a great many people will come out to see the Exposition and travel through the western part of their own country, who might otherwise have gone to Europe.

### ORIGINAL ARTICLES

#### THE INTIMATE RELATION OF ORTHOPEDIC SURGERY TO NEUROLOGY.

By H. W. WRIGHT, M. D., Santa Barbara.

The stimulus to the production of this paper comes from a recent experience with several interesting and instructive cases which came 'under the author's observation in one of the busiest orthopedic dispensaries. Neurology and orthopedic surgery have always had much in common, but as time goes on and neurological diagnosis becomes more exact the communal interest of the two branches of medicine becomes more important. In the dispensary where the writer had the privilege of working hardly a week passes without a patient who needs a thorough neurological examination dropping in, and judging from the number of cases referred from a nearby neurological hospital, orthopedic conditions are as frequently met with there. Such an experience cannot fail to convince one of the necessity of the orthopedist having a thorough knowledge of organic and functional neurology and a habit of making a careful and complete neurological examination in every obscure case.

It will not do to take the attitude that any patient showing signs of organic lesion of the nervous system belongs to the neurological specialist, and therefore ceases to be interesting. Many such patients need orthopedic treatment, and the particular treatment depends very much upon the neurological examination and must be interpreted by the orthopedist himself in order to treat the patient effectively. Thus might time and suffering be spared to many patients who are now shifted from one specialist to another, because neither has sufficient interest in, or knowledge of, the other's branch of work to make a complete examination. The patient does, indeed, need specialistic treatment; but, first of all, a correct diagnosis is essential and a correct diagnosis is most surely obtained by the man whose field of vision is not limited to one organ or region of the human anatomy. We have in our large cities unlimited clinical material and it is only the lack of co-operation between the different clinics, hospitals and medical societies that prevents the modern specialist from being a well rounded man so far as diagnosis is concerned.

Perhaps there is no disease in which more confusion of neurological with orthopedic symptoms and indications for treatment can exist than hysteria. This fact has nowhere been so graphically illustrated as in the monograph by Dr. Newton Shaffer, entitled "Hysterical Joint Affections," and published in 1880. Numerous cases are therein detailed and show that the author had a good grasp upon neurology, as well as upon his own specialty.

Hysteria may simulate any disease, and here